PTO/SB/17 (07-06)

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.00 July der the Pa	perwork Reducti	ion Act of 19	95, no person are req	uired to n	U.S. Patent espond to a collection	Approv and Tradem of information	red for use through ark Office; U.S. DE on unless it display	01/31/2007. C PARTMENT O s a valid OMB	)MB 0651-0032 F COMMERCE control number.
						Com	plete if Know	/n	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Application Number 09/840,085-Conf. #2186				
FEE TRANSMITTAL					Filing Date April 24, 2001				
For FY 2005				ļ			Alanna S. Sch	epartz	
					Examiner Name M. P. Allen  Art Linit 1647			<del></del>	
					V0007 7004014			1000	
TOTAL AMOUNT OF PAYMENT (\$) 1005.00					Attorney Docket No. Y0087.70010US00				
METHOD OF	PAYMENT	(check al	l that apply)					_	
x Check	Credit Ca	rd	Money Order	Non	e Other (	please ident	ify):		
x Deposit Ac	count Deposi	it Account Nu	mber: 23/2825 De	posit Acc	ount Name:	Wolf, C	Greenfield & S	acks, P.C.	
For the	above-identif	ied depos	it account, the Dir	ector is	hereby authorize	d to: (chec	k all that apply)	)	
C	harge fee(s) i	ndicated t	pelow		Charge	e fee(s) ind	licated below, e	xcept for th	e filing fee
			e(s) or underpaym	ent of	x Credit	any overpa	ayments		
FEE CALCUI	e(s) under 3	7 CFR 1.1	6 and 1.17						
		AND EX	AMINATION FEE	<del></del>		-			
	.,		NG FEES		ARCH FEES	EXAMIN	IATION FEES	;	
Application Ty	vna	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	Paid (\$)
Utility	100	300	150	500	250	200	100	10031	aid 141
Design		200	100	100	50	130	65		<del></del>
Plant		200	100	300	150	160	80		
Reissue		300	150	500	250	600	300		
Provisional		200	100	0	0	0	. 0		
2. EXCESS CLA	AIM FEES			_		•			Small Entity
Fee Description Fee									Fee (\$)
Each claim over 20 (including Reissues)								50	25
Each independe		r 3 (includ	ling Reissues)					200	100
Multiple dependent claims								360	180
				Fee P	'aid (\$)		ultiple Depend		
HP = highest num	- 56 = ber of total clain	ns paid for, it	greater than 20.			<u>Fe</u>	e (\$)	Fee Paid (\$	1
Indep. Claims	Extra C	laims	Fee (\$)	Fee P	'aid (\$)				_
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HP = highest num	ber of independ	ent claims p	aid for, if greater than	3.					_
listings und	ation and drav der 37 CFR 1	.52(e)), th	eed 100 sheets of e application size	fee du	e is \$250 (\$125 f				)
Total Sheet		tra Sheets	U.S.C. 41(a)(1)(0		dditional 50 or frac	tion thereo	f <u>Fee (\$)</u>	Fee I	Paid (\$)
Total Gliger	- 100 =	<u>aa oneeta</u>	/50	eacii at				=	<u> </u>
4. OTHER FEE(S)								Fees Paid (\$)	
Non-English	FEE(S)  glish Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00 2801 Request for continued examination (RCE) (see 37 395.00									
					examinat	(110E	, ( <del>505</del> 57		5.55
SUBMITTED BY Signature	//-	11.	<del></del>	T	Registration No.	52,728	Telephone	(617) 64	6-8000
Name (Print/Type)	Tani Chen	Sc D			(Attorney/Agent)	JZ,120	+	December	
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Certificate of Mailing Under 37 CFR 1.8(a)									
			Ceruncate (	JI WALLIN	iu ulluer 3/ CPK 1	.0183			

Certificate of Malling Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, NA 22313-1450.

Dated:

Signature: